

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED TEC MAIL CENTER

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FEC FORM 3

(Revised 02/2003)

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street) Check if different than previously reported. (ACC) Check if different than previously reported.	5-9-3 wollo	OITY A	STATE A	7//6- ZIP CODE A
C00566	4] · · · · · · 3. · is	THIS NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Cr. (a) Quarterly Reports: April 15 Quarterly F October 15 Quarterly F January 31 Year-En Termination Report	Report (Q1) Report (Q2) rily Report (Q3) and Report (YE) (C) 30-	Primary (12P) Convention (12C) ection on Day POST-Election Report for General (30G)	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period I certify that I have examined the Type or Print Name of Treasure Signature of Treasurer	water A. P.	of my knowledge and belief it	is true, correct and com	9 / 5 / 37.5 1.5
NOTE: Submission of false, error	eous, or incomplete informa	ানি স্কল্পনার বিভাগ বিভ	ling this Report to the per	nalties of 52 U.S.C. §30109.

FE6AN023

Office

Use Only

2015-10-21-03-00029637

SUMMARY PAGE

of Receipts and Disbursements

Page 2

	1 LO 1 Offit O (Nevised 02/2003)	<u>_</u>	
٧	Vrite or Type Committee Name		
F	Report Covering the Period: From:	'	1018512015
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	Committee of Samuel Commit	,,107,6,7
	(b) Total Contribution Refunds (from Line 20(d))	0	
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))		1,262
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures	<u></u>	,,,,,,,,3,1,3,5
	(b) Total Offsets to Operating Expenditures (from Line 14)	n	
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	(1)(1)	31,39
8.	Cash on Hand at Close of Reporting Period (from Line 27)	()	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	And the second area of the secon	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

FE5AN018

10. Debts and Obligations Owed **BY** the Committee (Itemize all on

Schedule C and/or Schedule D)

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Dost Brien

Report Covering the Period:

From:



To:



	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		10252
	(ii) Unitemized		
	(b) Political Party Committees		
	(d) The Candidate		1026.7
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	(b) All Other Loans		
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)		

2015:10:21:0M:0002000

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

ursements Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	Special and the Special Control of the Control of t	The first of the contract of t
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		
20.	(add Lines 19(a) and (b))	and the second s	المستركمينية والمستركمينية والمستركمينية المراودات المراد
	(a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		7
21.	OTHER DISBURSEMENTS		and sales death about sales death about
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	And the second s	The state of the s
	III. CASH SI	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	7/23
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	formal and the contract the con
25.	SUBTOTAL (add Line 23 and Line 24)		712)
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	Annual Samuel
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)	NG PERIOD	7173

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SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

NAME OF COMMITTEE (in Full)

Full Name (Last, First, Middle Initial)

PAGE OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a 114 11b 11c Detailed Summary Page 12 <u>1</u>3b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

A.			Date of Receipt
٦.	Mailing Address		MVM / BBB / YVV
	City	State Zip Code	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
_	Full Name (Last, First, Middle Initial)		Date of Receipt
В.	Mailing Address		MUM / OUO / YVVVV
	City	State Zip Code	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
_	Full Name (Last, First, Middle Initial)		Date of Receipt
C.	Mailing Address		MAM , DED , VARA VAR
	City	State Zip Code	Samuchannel Garanteered Spanishmantament
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
[5	SUBTOTAL of Receipts This Page (optional)		
1	TOTAL This Period (last page this line numbe	r only)	

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		any person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Full Name (Last, First, Middle Initial) A.		Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name		gory/ pe
State: District: Full Name (Last, First, Middle Initial)		
В.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name		gory/ pe
Office Sought: House Disbursement Forman Senate Primary Other		
State: District:		
Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City State Z	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name		egory/ epe
State: District:		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)		

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CHEDULE C (FEC	Form 3)				PAGE	OF
	, o,,,,, o,		Use separate sch for each category		FOR LINE NUMBER:	13a
OANS			Detailed Summan		(check only one)	13b
IAME OF COMMITTEE (In Ful	0				<u> </u>	
JE E	Žrion					
LOAN SOURCE Full Nam	<u> </u>	dle Initial)		Fle	ection:	
LOAN SOUNCE Tun Nam	e (Last, 1 list, Mid	die miliai)			Primary	
					General	
Mailing Address					Other (specify) 🔻	
City		State ZIP C	ode			
Original Amount of Loan		Cumulative Payment T	o Date	Balance	Outstanding at Close of	This Perio
7			, and the second	§		
TERMS						
Date Incurre		Date Due אין אין סיסי		Rate	Secui	red:
M M / D D / Y		W - M / D - D / Y			% (apr)	es No
List All Endorsers or Gua	rantors (if any) to	Loan Source	<u> </u>			
1. Full Name (Last, First,	Middle Initial)		Name of Employer			
Mailing Address			Occupation		 	
						
City	State	ZIP Code	Amount Guaranteed	- Company		7
City	State	ZIP Code		- Cural Car		المحم
2. Full Name (Last, First, M	/liddle Initial)		Name of Employer			
Mailing Address			Occupation			
0.14	C+-+-	7ID 0-4-	Amount Guaranteed	-		
City	State	ZIP Code	Contraction of the B			لحد
3. Full Name (Last, First, M	/liddle Initial)		Name of Employer			
		,	<u> </u>			
Mailing Address			Occupation			
			Amount		zie zakonion bankanion	
City	State	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, M	/liddle Initial)		Name of Employer			
Mailing Address			0			
Walling Address			Occupation			
			→ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	and and a		7-7
City	State	ZIP Code	Guaranteed Outstanding:	en l'action		لد
						
				<u></u>		······································
SUBTOTALS This Period This	Page (optional)		·····		<u></u>	
TOTALS This Period (last page	ge in this line only)				^1\
Carry outstanding balance of	nly to LINE 3, Sch	edule D, for this line. I	f no Schedule D, carry	<u>forward</u>	to appropriate line of	Summary.

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

ederal Election Commission, Washington, D.C. 20463		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Dott Brian		
ENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
ull Name		Carried Income Carried
		· · · · · · · · · · · · · · · · · · ·
ailing Address	Date Incurred or Established	May (Page) (Maray
		Mam / LOSO / LAAAAAA
ity State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurre	ed Mam / Daro / Varyary
B. If line of credit,	Total	
	Outstanding	
Amount of this Draw:	Balance:	
C. Are other parties secondarily liable for the debt incu	rred?	
No Yes (Endorsers and guarantors m	nust be reported on Schedule C	.)
D. Are any of the following pledged as collateral for the	e loan: real estate, personal	What is the value of this collateral?
property, goods, negotiable instruments, certificates	of deposit, chattel papers,	
stocks, accounts receivable, cash on deposit, or oth	ner similar traditional collateral?	
No Yes If yes, specify:		Dags the lander have a perfected assurit
		Does the lender have a perfected security interest in it? No Yes
E. Are any future contributions or future receipts of inte	erest income, pledged as	
	specify:	What is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
M M / D D / Y Y Y Y	City State Zing	
	City, State, Zip:	
F. If neither of the types of collateral described above exceed the loan amount, state the basis upon which		
G. COMMITTEE TREASURER		DATE
Typed Name		
Signature		
H. Attach a signed copy of the loan agreement.	 	
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the are accurate as stated above.	terms of the loan and other info	ormation regarding the extension of the loa
II. The loan was made on terms and conditions (including interest rate) no more	favorable at the time than those imposed for
similar extensions of credit to other borrowers III. This institution is aware of the requirement tha complied with the requirements set forth at 11	t a loan must be made on a ba	sis which assures repayment, and has
UTHORIZED REPRESENTATIVE		
Typed Name		DATE
	litle little	
		Cessived besident besides

	(FEC Form 3)		(Use separate	PAGE OF
BTS AND OF	•		schedule(s)	FOR LINE NUMBER:
cluding Loans	DEIGATIONS		for each numbered line)	(check only one) 9
ME OF COMMITTEE	(In Full)			1
120D	Brian			
	, First, Middle Initial) of Deb	tor or Creditor	Nature of I	Debt (Purpose):
·				
Mailing Address				
City State		Zip Code		
Oity State		Zip Gode		
		Payment This Period		ti - 190 m. 18
D. C. H. Marrier, Alexander	First Middle Initial of Dalet	or or Craditor	Matura of I	D - (- 1 /D)
B. Full Name (Last,	First, Middle Initial) of Debt	or or creditor	Nature of t	Debt (Purpose):
Mailing Address	First, Middle Initial) of Debt	or or Greditor	Nature of 1	Debt (Purpose):
		Zip Code	Nature of t	Debt (Purpose):
Mailing Address City State Outstanding Bala	ance Beginning This Period		Nature of t	Debt (Purpose):
Mailing Address City State Outstanding Bala			Nature of t	Debt (Purpose):
Mailing Address City State Outstanding Bala	ance Beginning This Period		Outstand	ling Balance at Close of This Per
Mailing Address City State Outstanding Bala	ance Beginning This Period	Zip Code	Outstand	ling Balance at Close of This Pe

Mailing	Address			
City	State		Zip Code	
Outsta	anding Balance Beginning			
C	Amount Incurred This Pe	eriod	Payment This Period	Outstanding Balance at Close of This Period
C. Full	Name (Last, First, Middle	Initial) of Debtor of	r Creditor	Nature of Debt (Purpose):
Mailing	Address			
City	· · · · · · · · · · · · · · · · · · ·		State Zip Code	
Outst	anding Balance Beginning	This Period		
	Amount Incurred This Pe		Payment This Period	
SUBTO	OTALS This Period This Pa	age (optional)		>
TOTAL	S This Period (last page t	<u> </u>		
TOTAL	OUTSTANDING LOANS			
		•		

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Nam	Name of Principal Campaign Committee (In Full) Report Covering Period:								
ĺ	From:								
+	Dast 6	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees						
А									
ВС	Column Total Last Page C)nly							
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans			
A									
В									
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(I) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees			
A									
В									
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees			
A									
В				,					
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee			
A									
В			<u> </u>	<u> </u>					
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures						
A									
В									



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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
B	10/21/15
PREPARER (3/2015)	DATE PREPARED